COM. L

CLAIM OF: ALLSTATE INSURANCE COMPANY

P. O. Box 227257 AS SUBROGEE OF NORMA J. CRAYND A CHM.

Dallas, Texas 75222-7257

of a vehicular accident on December 14, 1999 at 4601 For damages alleged to have been sustained as a result West Fayetteville Road.

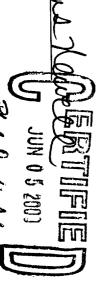
BY PUBLIC SAFETY AND LEGAL ADMINISTRATION COMMITTEE:

alleged to have been sustained as a result of a and future, of every kind and character for damages settlement and satisfaction of all claims, past, present approved in authorizing payment to ALLSTATE Atlanta that the action of the Department of Law be Claims, Department of Law. account 2H01/529017/T31001, Settlement of Suits and within claim; said sum taken from and charged to Fayetteville Road as is more particularly set forth in the vehicular accident on December 14, 1999 at 4601 West NORMA J. CRAYNE the sum of \$1,000.00 in full INSURANCE COMPANY AS SUBROGEE OF BE IT RESOLVED by the Council of the City of

[5]

Tun.

APPROVED: SUSAN PEASE LANGFORD



APPROVED

WITHOUT SIGNATURE BY OPERATION OF LAW

ATLANTA CITY COUNCE PRESIDENT

JUN - 5 2000

CITY ATTORNEY

JUN 05 7000 ADOPTED BY COUNCIL

DEPUTY CITY ATTORNEY ROSALIND RUBENS NEWELL



#### MUNICIPAL CLERK ATLANTA, GEORGIA

00-R-0785

A RESOLUTION

BY PUBLIC SAFETY & LEGAL ADMINISTRATION COMMITTEE

BE IT RESOLVED BY the Council of the City of Atlanta that the action of the Department of Law be approved in authorizing payment to Allstate Insurance Company as subrogee of Norma J. Crayne the sum of \$1000.00 in full settlement and satisfaction of all claims, past, present and future, of every kind and character, for damages alleged to have been sustained as a result of a vehicular accident on December 14, 1999 at 4601 West Fayetteville Road as is more particularly set forth in the within claim; said sum taken from and charged to Account 1A01/529017/T31001, Settlement of Suits and Claims, Department of Law.

A true copy,

Thomas Daughin Johnson Municipal Clerk, CMC ADOPTED by the Council
RETURNED WITHOUT SIGNATURE OF THE MAYOR
APPROVED as per City Charter Section 2-403

JUNE 05, 2000

JUNE 14, 2000

# DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 00L0047	Date: May 12, 2000
	AND A CAMPAGE OF MODICAL I CRAVATE
Claimant / VictimALLSTATE INSURANCE COMP	ANY AS SUBROGEE OF NORMA J. CRAYNE
BY: (Atty) (Ins. Co.)	222 7257
Address: P. O. Box 227257, Dallas, Texas 75	222-1231 Podily Injury \$
Subrogation: X Claim for Property damage \$ 1,003	Bodily Injury \$
Date of Notice: 01/25/00 Method: Writer	Ante Litem (6 Mo.) X
Date of Occurrence 12/14/99 Place:	4601 West Favetteville Road
Date of Occurrence 12/14/99 1 lacc.	Division:
Department Aviation Employee involved Kim Baitey	Disciplinary Action: Written Reprimand
Employee involved Kim Battey	Disciplinary French
NATURE OF CLAIM: The driver of the City vehicle mis damages in the above amount.	judged her clearance and struck the claimant's vehicle causing
damages in the doore amount.	
INVESTIGATION:	
Statements: City employee Claimant	Others Written Oral
Pictures Diagrams Reports: Police	X Dept Report X Other
Traffic citations issued: City Driver	Claimant Driver
Citation disposition: City Driver	Claimant Driver
BASIS OF RECOMMENDATION:	
Function: Governmental X	Ministerial Other Damages reasonable
Improper Notice More than Six Months	Other Damages reasonable
City not involved Offer rejected	Compromise settlement X
Repair/replacement by Ins. Co.	Repair/replacement by City Forces
Claimant Negligent City Negligent X	Joint Claim Abandoned
	Respectfully submitted,
	Mush
	INVESTIGATOR - DIANNE C. MITCHELL
RECOMMENDATION:	count charged: 1A01 / 2J01 2H01 X
14) 4 / 1000000 / / / / / / / / / / / / / / /	Concur/date 5/12/00
Claims Manager: / / / / Committee Action:	Council Action
Commutee Action.	
FORM 23-61	



ALLSTATE INSURANCE COMPANY

P.O. BOX 168288 IRVING

TX 75016

(800) 374-4246

ENTERED - 1-28-00 - SB00L0047 - MIKE REEVES

Reeves

01/19/00

01/24/00

CITY OF ATLANTA CLAIMS, 14TH FLOOR 68 MITCHELL ST 4100 ATLANTA GA 30335

OUR INVESTIGATION INDICATES THAT YOUR INSURED WAS RESPONSIBLE FOR THIS LOSS.

SINCE WE HAVE ALREADY MADE A BELLLEMENT WITH OUR FOIL LOZMOLOGK THE CLAIM HAS BEEN ASSIGNED TO US. COPIES OF THE FINAL FACENS RELATING TO THE LOSS ARE ENCLOSED.

PLEASE ACCEPT THIS LETTER AS NOTICE OF OUR SUBROGATION CLAIM. PLEASE FORWARD YOUR PAYMENT WITH OUR CLAIM NUMBER TO:



DIRECT ANY OTHER CORRESPONDENCE TO THE ADDRESS AT THE TOP OF THIS LETTER.

SINCERELY,

CUSTOMER SERVICE

ALLSTATE INSURANCE COMPANY

CBP:G

YOUR FILE NO. : SELF INSO

YOUR INSURED : CITY OF ATLANTA

ADDRESS

1 4501 W FAYETTEUTLLE

COLLEGE PARK GA 00000

QUR CLATM NO. : 6953146939 ESO

OUR INSURED : NORMA J CRAYNE

LOSS DATE

1 12/14/99

LOCATION

4601 W FAYETTEVILL RD (COL PRK) COLLEGE PARK

AMOUNT OF LOSS:

**\$1,005.12** 

# GENERAL RELEASE AND INDEMNIFICATION

CLAIM NUMBER 00L0047	\$1,000.00
IN CONSIDERATION of the sum of	ONE THOUSAND AND NO/100
DOLLARS, to be paid to me by acknowledged, I do hereby, for myself, my he discharge said City, its officers and employees, it demands, actions, causes of action, suits, damage of anything that has heretofore occurred, and pa	the CITY OF ATLANTA, the future receipt of which is hereby eirs, executors, administrators, and assigns, release and forever including but not limited to <u>Kim Baitey</u> , from any and all claims, s, loss and expenses, of whatsoever kind or nature for or on account reticularly for or on account of <u>a vehicular accident</u> day of <u>December</u> , 2000,
	day ofbeember
at or near 4601 West Fayetteville Road	
admission on the part of the City, its officers, a undersigned further covenants and agrees to ind servants and employees, from any and all claim agents, servants and employees, may be called a And I now state that the only considerati	the payment of the above named sum is not to be considered as an gents, servants or employees, of any liability whatsoever and the lemnify and hold harmless the City of Atlanta, its officers, agents, ms, damages or costs which the said City of Atlanta, its officers, upon to make as a result of the event hereinbefore referred to.  on for my signing this release and indemnification is the payment
of the sum stated above: that no other promise of	or agreement of any kind or nature has been made to or with me by release, and that I fully understand the meaning and intent of this
WITNESS my hand and seal this	3+ day of MAY , 2000.
	ALLSTATE INSURANCE COMPANIES AS SUBROGEE OF NORMA J. CRAYNE
A	ed to, and signed by the said Allstate Insurance
<u>Companies Subrogee of Norm</u>	in our presence on the date above written.
	Michele Stelle
	Hand Gernsley
	Witnesses

# Atlanta City Council

# Regular Session

### CONSENT AGENDA PAGES (1 - 10)

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#### ADOPT

YEAS: 14
NAYS: 0
ABSTENTIONS: 0
NOT VOTING: 1
EXCUSED: 0

SEE ATTACHED LISTING OF ITEMS ADOPTED/ADVERSED ON CONSENT AGENDA

Y	McCarty	Y	Dorsey	Y	Moore	Y	Thomas	
Y	Starnes	Y	Woolard	Y	Martin	Y	Emmons	ITEM (S) REMOVED FROM
Y	Bond	Y	Morris	Y	Maddox	Y	Alexander	CONSENT AGENDA
В	Winslow	Y	Muller	Y	Boazman	VИ	Pitts	00-O-0662

ABSENT 1

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	06/05/00 Council Meeting
ITEMS ADOPTED ON	ITEMS ADVERSED ON
CONSENT AGENDA	CONSENT AGENDA
COMBENTATION	
1. 00-O-0590	39. 00-R-0775
2. 00-O-0677	40. 00-R-0776
3. 00-O-0712	41. 00-R-0777
4. 00-O-0752	42. 00-R-0778
5. 00-O-0592	43. 00-R-0779
6. 00-O-0593	44. 00-R-0780
7. 00-O-0594	45. 00-R-0781
8. 00-O-0625	46. 00-R-0782
9. 00-O-0666	47. 00-R-0786
10. 00-O-0673	48. 00-R-0787
11. 00-O-0722	49. 00-R-0788
12. 00-O-0724	50. 00-R-0789
13. 00-O-0725	51. 00-R-0790
14. 00-O-0730	52. 00-R-0791
15. 00-O-0589	53. 00-R-0792
16. 00-O-0713	54. 00-R-0793
17. 00-O-0714	
18. 00-O-0715	
19. 00-O-0716	
20. 00-R-0753	
21. 00-R-0794	
22. 00-R-0761	
23. 00-R-0719	
24. 00-R-0763	
25. 00-R-0764	
26. 00-R-0762	
27. 00-R-0765	
28. 00-R-0766	
29. 00-R-0768	
30. 00-R-0769	
31. 00-R-0770 32. 00-R-0771	
32. 00-R-0771 33. 00-R-0772	
33. 00-R-0772 34. 00-R-0773	
35. 00-R-0774	
1	
1	
36. 00-R-0783 37. 00-R-0784 38. 00-R-0785	